FORM PTO 89-	U.S. DEPARTM	ENT OF COMMERCE	SERIAL NUMBER		FILING I	FILING DATE		
PATENT APPLICATION FEE DETERMINATION				979111		19	19 44 7	
				APPLICANT (First Named Only)		Only)	1 /- 0/-/	
		RECORD		Cha	lea	la es		
			CLAIMS AS FIL	ED - PART I			, , , , , , , , , , , , , , , , , , ,	
	(1) FOR		(2) Number Filed		R	(4) RATE	(5) BASIC FEE \$65.00	
	TOTAL CLAIMS	/	J J -10= 2 - 1=		2=	- \$2.00	24	
	INDEPENDE CLAIMS	ENT			/ =		10	
					TOT FEE	AL FILING	99	
			CLAIMS AS AMEN	DED - PART			<del></del>	
	(1):	(2)	(3)	(4)	(5)	(6)	(7)	
		CLAIMS REMAINING AFTER AMENDMENT	PI	GHEST NO. REVIOUSLY PAID FOR	PRESE		ADDITIONAL FEE	
AMENDMENT	TOTAL	*	MINUS	*	=	× 52	**************************************	
	INDEP.	* MINUS-		me :		- \$10	<b>*</b> p (Mo <b>v •</b> l	
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				
	TOTAL	*2-0	MINUS -	*	=	- \$2		
AMENDMENT	INDEP.	* /	MINUS	e.	=	. \$10	2	
10				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				
	TOTAL	*	MINUS	*	=	× \$2	2	
AMENDMENT	INDEP.	*	MINUS		=	- \$10	:	
·				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				
AMENDMENT	TOTAL	*	MINUS	*	=	- \$2	=	
	INDEP.	*	MINUS		÷	× \$10	=	
	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT							
* If the ent	ry in Column 2	is loss than the e	ntry in Column 4, w	rite "O" in C	slume 5	L		

The "Highest Number Previously Paid For" ("Total" or "Indep.") is the highest number found in the appropriate box in Column 2.

<sup>\*\*</sup> If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Poid For" IN THIS SPACE is less than 10, write "10" in this space.